

ISSUE SLIP STATE FORM 4 (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		43	4/23/98
FORMALITY REVIEW		69652	4-29-98

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	4/23/98
1	8/25/02
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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